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**FROMMER LAWRENCE & HAUG LLP**

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**FACSIMILE COVER LETTER**

**To:** Commissioner for Patents  
TECHNOLOGY CENTRE ART UNIT 2851

**Firm:** U.S. Patent and Trademark Office

**Facsimile No.:** 703-872-9306

**From:** William S. Frommer

**Date:** June 2, 2005

**Re:** **Serial No. 10/633,178**  
Attorney Docket 450100-04705

**No. of Pages:** 8

Entry of the enclosed Amendment under CFR §1.312 is respectfully requested. This Amendment was originally sent by facsimile to Examiner Perkey on May 12, 2005.

*Laila Korde (for)*  
William S. Frommer  
Reg. No. 25,506

(including cover page)

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If you do not receive all pages or are unable to read the transmission, please call Laila Korde at Ext. 2011

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**CONFIDENTIALITY NOTICE**

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PATENT  
450100-04705IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s) : Seichi KATO et al. Notice of Allowance  
 Serial No. : 10/633,178 Dated: March 18, 2005  
 Confirmation No. 4892  
 For : CAMERA APPARATUS  
 Filed : August 1, 2003  
 Examiner : William B. Perkey  
 Art Unit : 2851

745 Fifth Avenue  
 New York, NY 10151  
 Tel: 212-588-0800

Mail Stop Issue Fee  
 Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an amendment in the above-identified application.

- ☒ No additional fee is required.  
☐ The fee has been calculated as shown below.  
☐ This is an application of a small entity under 37 CFR 1.9(f), and the amounts shown in parentheses apply.

Claims as Amended

(1)	(2) Claims remaining after amendment	(3)	(4) Highest number previously paid for	(5) Present extra	(6) Rate	(7) Additional Fee
Total claims	6	Minus	** =20	* 0 x	\$50 (25)	= \$ 0
Independent claims	1	Minus	*** =3	* 0 x	\$200 (100)	= \$ 0
Total additional fee for this amendment						\$ 0

- \* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.  
 \*\* If the highest number of total claims previously paid for is less than 20, write "20" in this space.  
 \*\*\* If the highest number of independent claims previously paid for is less than 3, write "3" in this space.

- ☐ This application contains a multiple dependent claim. The required fee of \$360(180) has been previously paid ☐, or is paid herewith ☐.
- ☐ This response is being filed within the \_\_\_\_\_ month following the expiration of the term originally set therefor. This is a petition to request a \_\_\_\_\_ month extension of time. A check covering the cost of the petition is enclosed.
- ☐ A check in the amount of \$\_\_\_\_\_ is attached, which covers the cost of ☐ additional claims \_\_\_\_\_ petition for extension of time.
- ☐ Charge \$\_\_\_\_\_ to Deposit Account No. 50-0320.
- ☒ Please charge any additional fees incurred by reason of this response or credit any overpayment to Deposit Account No. 50-0320.

FACSIMILE

I hereby certify that this paper is being facsimile transmitted to the Patent and Trademark Office on the date shown below.

Barnet Shindler  
 Type or print name of  
 person signing certification  
[Signature]  
 Signature

May 12, 2005  
 Date of Signature

Respectfully submitted,

FROMMER LAWRENCE & HAUG LLP  
 Attorneys for Applicants

By: [Signature]  
 William S. Frommer  
 Reg. No. 25,506  
 Tel: 212-588-0800

PATENT  
450100-04705**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant(s) : Seichi KATO et al.  
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Patent and Trademark Office on the date shown below.

Barnet Shindlman

Type or print name of  
person signing certification

Barnet Shindlman

Signature

May 12, 2005

Date of Signature

**AMENDMENT UNDER 37 C.F.R. 1.312**

Mail Stop Issue Fee  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

In response to the Notice of Allowance that issued on March 18, 2005 in the above-  
identified application, please amend this application as follows: